

CJA 24 AUTHORIZATION AND VOUCHER FOR PAYMENT OF TRANSCRIPT (Rev. 12/03)

1. CIR./DIST./DIV. CODE EDNY	2. PERSON REPRESENTED Philip A. Kenner	VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER	4. DIST. DKT./DEF. NUMBER 13-cr-607	5. APPEALS DKT./DEF. NUMBER	6. OTHER DKT. NUMBER
7. IN CASE/MATTER OF (<i>Case Name</i>) USA v. Philip A. Kenner	8. PAYMENT CATEGORY <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <input type="checkbox"/> Appeal	9. TYPE PERSON REPRESENTED <input checked="" type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <input type="checkbox"/> Other	10. REPRESENTATION TYPE (See Instructions)

11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) *If more than one offense, list up to five major offenses charged, according to severity of offense.***18 U.S.C. 1343, 1349****REQUEST AND AUTHORIZATION FOR TRANSCRIPT**

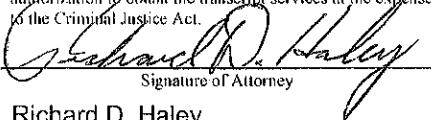
12. PROCEEDING IN WHICH TRANSCRIPT IS TO BE USED (Describe briefly)

Forfeiture hearing

13. PROCEEDING TO BE TRANSCRIBED (Describe specifically). *NOTE: The trial transcripts are not to include prosecution opening statement, defense opening statement, prosecution argument, defense argument, prosecution rebuttal, voir dire or jury instructions, unless specifically authorized by the Court (see item 14).*

Commencement of forfeiture hearing on February 12, 2016

14. SPECIAL AUTHORIZATIONS	JUDGE'S INITIALS
A. Apportioned Cost % of transcript with (Give case name and defendant)	
B. <input checked="" type="checkbox"/> Expedited <input type="checkbox"/> Daily <input type="checkbox"/> Hourly Transcript <input type="checkbox"/> Realtime Unedited Transcript	
C. <input type="checkbox"/> Prosecution Opening Statement <input type="checkbox"/> Prosecution Argument <input type="checkbox"/> Prosecution Rebuttal <input type="checkbox"/> Defense Opening Statement <input type="checkbox"/> Defense Argument <input type="checkbox"/> Voir Dire <input type="checkbox"/> Jury Instructions	
D. In this multi-defendant case, commercial duplication of transcripts will impede the delivery of accelerated transcript services to persons proceeding under the Criminal Justice Act.	

15. ATTORNEY'S STATEMENT	16. COURT ORDER
As the attorney for the person represented who is named above, I hereby affirm that the transcript requested is necessary for adequate representation. I, therefore, request authorization to obtain the transcript services at the expense of the United States pursuant to the Criminal Justice Act.  Signature of Attorney Date Richard D. Haley 2/16/2016	Financial eligibility of the person represented having been established to the Court's satisfaction the authorization requested in Item 15 is hereby granted. Signature of Presiding Judge or By Order of the Court 2/12/2016 Date of Order Nunc Pro Tunc Date
Printed Name Richard D. Haley Telephone Number: 631-582-5151 <input checked="" type="checkbox"/> Panel Attorney <input type="checkbox"/> Retained Attorney <input type="checkbox"/> Pro-Se <input type="checkbox"/> Legal Organization	

CLAIM FOR SERVICES

17. COURT REPORTER/TRANSCRIBER STATUS	18. PAYEE'S NAME AND MAILING ADDRESS					
<input type="checkbox"/> Official <input type="checkbox"/> Contract <input type="checkbox"/> Transcriber <input type="checkbox"/> Other						
19. SOCIAL SECURITY NUMBER OR EMPLOYER ID NUMBER OF PAYEE						
Telephone Number:						
20. TRANSCRIPT	INCLUDE PAGE NUMBERS	NO. OF PAGES	RATE PER PAGE	SUB-TOTAL	LESS AMOUNT APPORTIONED	TOTAL
Original				\$0.00		\$0.00
Copy				\$0.00		\$0.00
Expense (<i>Itemize</i>)						
TOTAL AMOUNT CLAIMED:						\$0.00

21. CLAIMANT'S CERTIFICATION OF SERVICE PROVIDED

I hereby certify that the above claim is for services rendered and is correct, and that I have not sought or received payment (*compensation or anything of value*) from any other source for these services.

Signature of Claimant/Payee

Date

ATTORNEY CERTIFICATION

22. CERTIFICATION OF ATTORNEY OR CLERK I hereby certify that the services were rendered and that the transcript was received.

Signature of Attorney or Clerk

Date

APPROVED FOR PAYMENT — COURT USE ONLY

23. APPROVED FOR PAYMENT	24. AMOUNT APPROVED
Signature of Judge or Clerk of Court	Date